United States of America

Department of Transportation — Federal Aviation Administration

Supplemental Type Certificate

Number SA7995SW 190-1533 AAM

This certificate, issued to Arkansas Aerospace, Center, Inc.
P.O. Box 3356 - Adams Field
Little Rock, AR 72203

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 25 of the Federal Aviation Regulations.

Original Product — Type Certificate Number: A12EA
Make: Gulfstream
Model: G-IV

Description of Type Design Change:

Installation of Cabin Emergency Light System in accordance with Arkansas Aerospace, Inc. Drawing List GIV-033, Revision A5, dated April 16, 1991, or later FAA approved revision.

Limitations and Conditions:

This STC is limited to Airplane Serial No. 1137 only. Airplane Flight Manual Supplement dated April 19, 1991, or later FAA approved revision, is required. Compatibility of this modification with previously installed equipment must be determined by installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: September 10, 1990 Date reissued:

Date of issuance: April 19, 1991 Date amended:

By direction of the Administrator

Patricia J. Long (Signature)

for Mark R. Schilling, Manager
Special Certification Office

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding $1,000, or imprisonment not exceeding 3 years, or both.

This certificate may be transferred in accordance with FAR 21.47.

FAA Form 8110-2 (10-68)

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to *(Name of transferee)* _____

(Address of transferee) _____
(Number and street)

_____
(City, State, and ZIP code)

from *(Name of grantor)* *(Print or type)* _____

(Address of grantor) _____
(Number and street)

_____
(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

_____

_____

_____

Date of Transfer: _____

Signature of grantor *(In ink)*: _____